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Department of Defense Information Paper

# Department of Defense (DoD) Initiative to Comport State Statutes with Federal Requirements for the Disposition of Service Members' Remains

**Goal:** Have states accept the DoD Record of Emergency Data, DD Form 93, as the document designating a person authorized to direct disposition (PADD) of remains for a member of the Armed Forces as defined in 10 USC  $\S$  1481 (a)(1) – (8).

**Issue:** Primary concern is that, with the exception of CO, DE, ME, MN, NV, NH, OR, SD and WV, the DD Form 93 may not meet the requirements of a state for legally designating an agent to direct disposition. Some states do not allow for an authorized agent, and other states have prescriptive requirements for documenting the designation of an agent that would preclude the DD Form 93 from being considered sufficient. For example, TX requires the document be signed by the designated individual (not required on the DD Form 93). Confusion over the appropriate statutory requirements has resulted in multiple civil actions between family members over the ultimate disposition of the Service member's remains. The proposed action is designed to clearly define the PADD to limit civil litigation and provide clarity during the stressful time of bereavement.

#### Commentary:

From a statutory standpoint, federal statutes require Service members to designate a PADD in the event of their death while on active duty. Public Law 109-163, § 564 requires the designation of a PADD, and 10 U.S.C. § 1482 (c) specifies who the Service member may select as a PADD. DoD Instruction 1300.18 implements these statutory requirements through the use of the DD Form 93, which also provides vital information for emergency notification and designation of beneficiaries.

From a practical standpoint, without establishing a consistent requirement for the designation of a PADD, active duty Service members (48 percent of which are less than 25 years old) would be far less likely to research the pertinent statute for their home state and complete the required documentation for designating an agent. As a result, disposition of a Service member's remains would more likely be determined according to the prioritized list of family members found in his or her home state statute.

10 U.S.C. § 1482 (c) limits the choices available to Service members (in no priority order) to the surviving spouse; blood relatives of the decedent, adoptive relatives of the decedent; or if none of these persons can be found, a person standing in loco parentis to the decedent. Although these choices are limited, it is believed that allowing for unrestricted designation could potentially increase civil litigation as a result of young Service members choosing friends and acquaintances (newly acquired Service buddies) over family members.

Finally, the use of the DD Form 93 ensures that Service members have reviewed their PADD designations at least annually and before departing on deployment. State statute has no provisions for ensuring the currency of a designation document.

# Statutory and Regulatory Requirements Concerning the Designation of a Person Authorized to Direct Disposition of a Decedent's Remains

#### Public Law 109-163:

SEC. 564. DESIGNATION BY MEMBERS OF THE ARMED FORCES OF PERSONS AUTHORIZED TO DIRECT THE DISPOSITION OF MEMBER REMAINS.

- (a) In General- Not later than June 1, 2006, the Secretary of Defense shall complete, and the Secretaries of the military departments shall implement, Department of Defense Instruction 1300.18, including interim policy guidance, regarding the requirement to have service members designate a person authorized to direct disposition of their remains should they become a casualty.
- (b) Report- Not later than July 1, 2006, the Secretary of Defense shall submit to the Committees on Armed Services of the Senate and the House of Representatives a report on the actions taken by the Secretary, and by the Secretaries of the military departments, to carry out the requirement in subsection (a).

# § 1481. Recovery, care, and disposition of remains: decedents covered

- (a) The Secretary concerned may provide for the recovery, care, and disposition of the remains of the following persons:
  - (1) Any Regular of an armed force under his jurisdiction who dies while on active duty.
  - (2) A member of a reserve component of an armed force who dies while-
    - (A) on active duty;
    - (B) performing inactive-duty training;
    - (C) performing authorized travel directly to or from active duty or inactive-duty training;
    - (D) remaining overnight immediately before the commencement of inactive-duty training, or remaining overnight, between successive periods of inactive-duty training, at or in the vicinity of the site of the inactive-duty training;
    - (E) hospitalized or undergoing treatment for an injury, illness, or disease incurred or aggravated while on active duty or performing inactive-duty training; or
    - (F) either-
      - (i) serving on funeral honors duty under section 12503 of this title or section 115 of title 32;

- (ii) traveling directly to or from the place at which the member is to so serve; or
- (iii) remaining overnight at or in the vicinity of that place before so serving, if the place is outside reasonable commuting distance from the member's residence.
- [(3) Repealed. Pub. L. 99–661, div. A, title VI, § 604(e)(3)(B), Nov. 14, 1986, 100 Stat. 3877.]
- (4) Any member of, or applicant for membership in, a reserve officers' training corps who dies while
  - (A) attending a training camp,
  - (B) on an authorized practice cruise,
  - (C) performing authorized travel to or from such a camp or cruise, or
  - (D) hospitalized or undergoing treatment at the expense of the United States for injury incurred, or disease contracted, while attending such a camp, while on such a cruise, or while performing that travel.
- (5) Any accepted applicant for enlistment in an armed force under his jurisdiction.
- (6) Any person who has been discharged from an enlistment in an armed force under his jurisdiction while a patient in a United States hospital, and who continues to be such a patient until the date of his death.

# (7) A person who-

- (A) dies as a retired member of an armed force under the Secretary's jurisdiction during a continuous hospitalization of the member as a patient in a United States hospital that began while the member was on active duty for a period of more than 30 days; or
- (B) is not covered by subparagraph (A) and, while in a retired status by reason of eligibility to retire under chapter 61 of this title, dies during a continuous hospitalization of the person that began while the person was on active duty as a Regular of an armed force under the Secretary's jurisdiction.
- (8) Any military prisoner who dies while in his custody.
- (9) To the extent authorized under section 1482 (f) of this title, any retired member of an armed force who dies while outside the United States or any individual who dies outside the United States while a dependent of such a member.
- (b) This section applies to each person covered by subsection (a)(1)–(7) even though he may have been temporarily absent from active duty, with or without leave, at the time of his death, unless he had been dropped from the rolls of his organization before his death.
- (c) In this section, the term "dependent" has the meaning given such term in section 1072 (2) of this title.

## 10 U.S.C § 1482:

- (c) Only the following persons may be designated to direct disposition of the remains of a decedent covered by this chapter:
- (1) The surviving spouse of the decedent.
- (2) Blood relatives of the decedent.
- (3) Adoptive relatives of the decedent.
- (4) If no person covered by clauses (1)–(3) can be found, a person standing in loco parentis to the decedent.

DoDI 1300.18, January 8, 2008 (Change 1, 8/14/09):

# E2. ENCLOSURE 2 DEFINITIONS

E2.42. <u>Person Authorized to Direct Disposition of Human Remains</u> (PADD). A person, usually the PNOK (see E2.46.), who is authorized to direct disposition of human remains. For disposing of human remains, under the authority of Reference (I), the Secretary of the Military Department concerned is deemed to have such standing if no other such person is available. Service members shall identify a PADD on their DD Form 93. (See instructions at Enclosure 7.)

# E7. ENCLOSURE 7 GENERAL INSTRUCTIONS FOR USE AND PREPARATION OF THE RECORD OF EMERGENCY DATA (DD FORM 93)

E7.1. <u>General</u>. The DD Form 93, when completed, for military personnel is an official record of the beneficiaries designated to receive death gratuity and pay allowances. For civilian personnel, the purpose of the form is emergency notification only in the event the member becomes a casualty. For both military and civilian personnel, it contains the name and address of the person(s) to be notified in the event of sickness, emergency, or death.

#### E7.2. Use

## E7.2.1. Mandatory:

- E7.2.1.1. For all applicants, officer and enlisted, accessing in the Armed Forces.
- E7.2.1.2. For all Active, National Guard, and Reserve Component personnel.
- E7.2.1.3. For all DoD civilians prior to admission to a possible theater of operations or deployment with the Armed Forces (References (n) and (o)).

<sup>&</sup>lt;sup>1</sup> The use of the DD Form 93 to designate a PADD is only mandatory for Service members. Individuals listed in E7.2.1.3. – E7.2.1.7 are not required to establish a PADD as part of completing the DD Form 93.

- E7.2.1.4. For all civilian contractors prior to admission to a possible theater of operations or deployment with the Armed Forces (References (n) and (o)).
- E7.2.1.5. For all OCONUS-based DoD civilian employees.
- E7.2.1.6. For all other civilians accompanying military units in the field or on deployment (e.g., embedded media).
- E7.2.1.7. For all CONUS-based or non-deploying DoD civilian employees.

## E7.3. Procedures

- E7.3.1. The DD Form 93 will be electronically produced and may be electronically signed. If electronically signed, a witness signature (block 16) is not required. If conditions preclude the use of electronic systems, the form may be typewritten or handwritten in ballpoint pen with black or blue-black ink as a temporary measure.
- E7.3.2. When not electronically signed, all signatures will be in black or blue-black ink.
- E7.3.3. At the first duty assignment following basic training, to include Service schools, the Military Service concerned will enter the DD Form 93 data into the Service electronic personnel system database and have the member verify its accuracy.

# E7.4. Preparation

- E7.4.1. Detailed instructions on the preparation of the paper version of the DD Form 93 are contained on the reverse of the form and will be used at all accession locations. (See Enclosure 8.)
- E7.4.2. Appropriate Service Directives will be promulgated to provide supplemental instructions for the completion of the electronic version of the DD Form 93. Electronic versions will, at a minimum, contain the information required on the paper version.
- E7.4.3. The Continuation/Remarks block of the DD Form 93 offers the greatest amount of flexibility for the member to record other important information not otherwise requested but considered extremely useful in the casualty notification and assistance process. Besides continuing information from other blocks on the form, the member may desire to include additional information such as: NOK language barriers, location or existence of a Will or other family member contact numbers. If a paper version of the DD Form 93 is used and there is insufficient space to record information, attach a supplemental page on standard bond paper with the additional information.
- E7.4.4. The Military component concerned will develop procedures for the preparation and recording of the DD Form 93 for personnel listed in paragraph E7.2.
- E7.4.5. The Military Service considered most appropriate will ensure the preparation of the DD Form 93 for all non-Departmental civilians, employees, or contractors. Examples: Embedded media serving with the Army Army responsibility; DoD employee on temporary duty with the Navy Navy responsibility.

## E7.5. Validation Requirements

- E7.5.1. Those individuals identified in paragraph E7.2.1. are solely responsible for the accuracy of the information recorded on the DD Form 93.
- E7.5.2. The Military Services will ensure that each Service member, civilian employee, or contractor as appropriate, verifies the accuracy of the data on the DD Form 93, at a minimum, on the following occasions:
  - E7.5.2.1. During the initial enlistment or employment review.
  - E7.5.2.2. Upon reporting to a new duty station.
  - E7.5.2.3. When ordered to periods of temporary duty in excess of 30 days.
  - E7.5.2.4. Prior to all deployments, regardless of length.
  - E7.5.2.5. Prior to departure on permanent change of station orders.
  - E7.5.2.6. Annually.

Current Montana Statute 37-19-904

Priority of Rights of Disposition

**37-19-904. Priority of rights of disposition.** (1) A person who is 18 years of age or older and of sound mind wishing to authorize another person to control the disposition of the person's remains may execute an affidavit or a written instrument before a notary public in substantially the following form:

"State of Montana ) ss	
County of]	
I,[person designating anoth	ner person to control the disposition of the person's
remains] do hereby designate	[person who is provided with the right to
control the disposition] with the right to control	the disposition of my remains upon my death. I
have or have not attached specific direction	ns concerning the disposition of my remains with which
the designee shall substantially comply, provided	the directions are lawful and there are sufficient
resources in my estate to carry out the direction:	s. Subscribed and sworn to before me this day of
the month of of the year	
ii ii	

- (2) Except as provided in <u>37-19-903</u>, <u>37-19-907</u>, and subsection (1) of this section, the right to control the disposition of the remains of a deceased person, including the location, manner, and conditions of the disposition and arrangements for funeral goods and services, vests in the following persons in the order named if the named person is 18 years of age or older and is of sound mind:
- (a) a person designated by the decedent as the person with the right to control the decedent's disposition in an affidavit or written instrument executed in accordance with subsection (1);
  - (b) the surviving spouse;
- (c) the sole surviving child of the decedent or, if there is more than one child of the decedent, the majority of the surviving children. However, less than one-half of the surviving children may be vested with the rights and duties provided in this section if those surviving children have used reasonable efforts to notify all other surviving children of their instructions and they are not aware of opposition to their instructions on the part of more than one-half of all surviving children.
- (d) the surviving parent or parents of the decedent. If one of the surviving parents is absent, the remaining parent may be vested with the rights and duties provided in this section if that parent's reasonable efforts have been unsuccessful in locating the absent surviving parent.
- (e) the surviving sibling of the decedent or, if there is more than one sibling of the decedent, the majority of the surviving siblings. However, less than one-half of the surviving siblings may be vested with the rights and duties provided in this section if those siblings have used reasonable efforts to notify all other surviving siblings of their instructions and they are not aware of any opposition to their instructions on the part of more than one-half of all surviving siblings.
- (f) the surviving grandparent of the decedent or, if there is more than one surviving grandparent, the majority of the grandparents. However, less than one-half of the surviving grandparents may be vested with the rights and duties provided in this section if those grandparents have used reasonable efforts to notify all other surviving grandparents of their instructions and are not aware of any opposition to their instructions on the part of more than one-half of all surviving grandparents.
- (g) the guardian of the decedent at the time of the decedent's death, if a guardian had been appointed;
  - (h) the personal representative of the estate of the decedent;
  - (i) the person in classes of the next degree of kinship, in descending order, under the laws of descent

and distribution to inherit the estate of the decedent. If there is more than one person of the same degree, any person of that degree may exercise the right of disposition.

- (j) if the disposition of the remains of the decedent is the responsibility of the state or a local government, the public officer, administrator, or employee responsible for arranging the disposition of the decedent's remains; and
- (k) in the absence of any person provided for in subsections (2)(a) through (2)(j), any other person, including the mortician with custody of the remains, who is willing to assume the responsibility to act and arrange the disposition of the decedent's remains after attesting in writing that a good faith effort has been made to contact the individuals provided for in subsections (2)(a) through (2)(j).

Record of Emergency Data

DD-Form 93

# RECORD OF EMERGENCY DATA

#### PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 552, 10 USC 655, 1475 to 1480 and 2771, 38 USC 1970, 44 USC 3101, and EO 9397 (SSN).

PRINCIPAL PURPOSES: This form is used by military personnel and Department of Defense civilian and contractor personnel, collectively referred to as civilians, when applicable. For military personnel, it is used to designate beneficiaries for certain benefits in the event of the Service member's death. It is also a guide for disposition of that member's pay and allowances if captured, missing or interned. It also shows names and addresses of the person(s) the Service member desires to be notified in case of emergency or death. For civilian personnel, it is used to expedite the notification process in the event of an emergency and/or the death of the member. The purpose of soliciting the SSN is to provide positive identification. All items may not be applicable.
ROUTINE USES: None.

DISCLOSURE: Voluntary, however, failure to provide accurate personal identifier information and other solicited information will delay notification and the processing of benefits to designated beneficiaries if applicable.

#### INSTRUCTIONS TO SERVICE MEMBER

#### This extremely important form is to be used by you to show the names and addresses of your spouse, children, parents, and any other person(s) you would like notified if you become a casualty (other family members or fiance), and, to designate beneficiaries for certain benefits if you die. IT IS YOUR RESPONSIBILITY to keep your Record of Emergency Data up to date to show your desires as to beneficiaries to receive certain death payments, and to show changes in your family or other personnel listed, for example, as a result

#### INSTRUCTIONS TO CIVILIANS

This extremely important form is to be used by you to show the names and addresses of your spouse, children, parents, and any other person(s) you would like notified if you become a casualty. Not every item on this form is applicable to you. This form is used by the Department of Defense (DoD) to expedite notification in the case of emergencies or death. It does not have a legal impact on other forms you may have completed with the DoD or your

employer. of marriage, civil court action, death, or address change. IMPORTANT: This form is divided into two sections: Section 1 - Emergency Contact Information and Section 2 - Benefits Related Information. READ THE INSTRUCTIONS ON PAGES 3 AND 4 BEFORE COMPLETING THIS FORM. SECTION 1 - EMERGENCY CONTACT INFORMATION 2. SSN 1. NAME (Last, First, Middle Initial) b. REPORTING UNIT CODE/DUTY STATION 3a. SERVICE/CIVILIAN CATEGORY CONTRACTOR DoD CIVILIAN MARINE CORPS AIR FORCE NAVY b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER 4a. SPOUSE NAME (If applicable) (Last, First, Middle Initial) WIDOWED SINGLE DIVORCED c. DATE OF BIRTH d. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER CHILDREN 5. b. RELATIONSHIP (YYYYMMDD) NAME (Last, First, Middle Initial) b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER 6a. FATHER NAME (Last, First, Middle Initial) b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER 7a. MOTHER NAME (Last, First, Middle Initial) 8a. DO NOT NOTIFY DUE TO ILL HEALTH b. NOTIFY INSTEAD b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER 9a. DESIGNATED PERSON(S) (Military only) 10. CONTRACTING AGENCY AND TELEPHONE NUMBER (Contractors only)

SECTION 2 - BENEFITS RELATED INFORMATION				
la. BENEFICIARY(IES) FOR DEATH GRATUITY (Military only)	b. RELATIONSHIP	c. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER	d. PERCENTAG	
		-		
a. BENEFICIARY(IES) FOR UNPAID PAY/ALLO	WANCES	b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER	c. PERCENTAG	
(Military only) NAME AND RELATIONSHIP			1	
. PERSON AUTHORIZED TO DIRECT DISPOSI	ITION (PADD)	b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER		
(Military only) NAME AND RELATIONSHIP	•			
			8	
CONTINUATION/REMARKS				
			49 DATE (101)	
SIGNATURE OF SERVICE MEMBER/CIVILIAN	N (include rank, rate,	16. SIGNATURE OF WITNESS (Include rank, rate, or grade as appropriate)	17. DATE SIGNE (YYYYMMDD)	
or grade if applicable)		ppp/	•	
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Department of Defense Information Paper

## **INSTRUCTIONS FOR PREPARING DD FORM 93**

(See appropriate Service Directives for supplemental instructions for completion of this form at other than MEPS)

All entries explained below are for electronic or typewriter completion, except those specifically noted. If a computer or typewriter is not available, print in black or blue-black ink insuring a legible image on all copies. Include "Jr.," "Sr.," "III" or similar designation for each name, if applicable. When an address is entered, include the appropriate ZIP Code. If the member cannot provide a current address, indicate "unknown" in the appropriate item. Addresses shown as P.O. Box Numbers or RFD numbers should indicate in Item 14, "Continuations/Remarks", a street address or general guidance to reach the place of residence. In addition, the notation "See Item 14" should be included in the item pertaining to the particular next of kin or when the space for a particular item is insufficient. If the address for the person in the item has been shown in a preceding item, it is unnecessary to repeat the address; however, the name must be entered. Those items that are considered not applicable to civilians will be left blank.

ITEM 1. Enter full last name, first name, and middle initial.

ITEM 2. Enter social security number (SSN).

ITEM 3a. Service. Military: Mark X in appropriate block. Civilian: Mark two blocks as appropriate. Examples: an Army civilian would mark Army and either Civilian or Contractor; a DoD civilian, without affiliation to one of the Military Services, would mark DoD and then either Civilian or Contractor as appropriate.

ITEM 3b. Reporting Unit Code/Duty Station. See Service Directives.

ITEM 4a. Spouse Name. Enter last name (if different from Item 1), first name and middle initial on the line provided. If single, divorced, or widowed, mark appropriate block.

ITEM 4b. Address and Telephone Number. Enter the "actual" address and telephone number, not the mailing address. Include civilian title or military rank and service if applicable. If one of the blocks in 4a is marked, leave blank.

ITEM 5a-d. Children. Enter last name (only if different from Item 1) first name and middle initial, relationship, and date of birth of all children. If none, so state. Include illegitimate children if acknowledged by member or paternity/maternity has been judicially decreed. Relationship examples: son, daughter, stepson or daughter, adopted son or daughter or ward. Date of birth example: 19950704. For children not living with the member's current spouse, include address and name and relationship of person with whom residing in item 5d.

ITEM 6a. Father Name. Last name, first name and middle initial.

ITEM 6b. Address and Telephone Number of Father. If unknown or deceased, so state. Include civilian title or military rank and service if applicable. If other than natural father is listed, indicate relationship.

ITEM 7a. Mother Name. Last name, first name and middle initial

ITEM 7b. Address and Telephone Number of Mother. If unknown or deceased, so state. Include civilian title or military rank and service if applicable. If other than natural mother is listed, indicate relationship.

ITEM 8. Persons Not to be Notified Due to III Health.
a. List relationship, e.g., "Mother," of person(s) listed in Items 4, 5, 6, or 7 who are not to be notified of a casualty due to iII health. If more than one child, specify, e.g., "daughter Susan." Otherwise, enter "None".
b. List relationship, e.g., "Father" or name and address of person(s) to be notified in lieu of person(s) listed in item 8a. If "None" is entered in Item 8a, leave blank.

ITEM 9a. This item will be used to record the name of the person or persons, if any, other than the member's primary next of kin or immediate family, to whom information on the whereabouts and status of the member shall be provided if the member is placed in a missing status. Reference 10 USC, Section 655. **NOT APPLICABLE to civilians.** 

ITEM 9b. Address and telephone number of Designated Person(s). **NOT APPLICABLE to civilians.** 

ITEM 10. Contracting Agency and Telephone Number (Contractors only). NOT APPLICABLE to military personnel. Civilian contractors will provide the name of their contracting agency and its telephone number. Example: XYZ Electric, (703) 555-5689. The telephone number should be to the company or corporation's personnel or human resources office.

ITEM 11a. Beneficiary(ies) for Death Gratuity (Military only). Enter first name(s), middle initial, and last name(s) of the person(s) to receive death gratuity pay. A member may designate one or more persons to receive all or a portion of the death gratuity pay. The designation of a person to receive a portion of the amount shall indicate the percentage of the amount, to be specified only in 10 percent increments, that the person may receive. If the member does not wish to designate a beneficiary for the payment of death gratuity, enter "None," or if the full amount is not designated, the payment or balance will be paid as follows:

- (1) To the surviving spouse of the person, if any;
- (2) To any surviving children of the person and the descendants of any deceased children by representation;
- (3) To the surviving parents or the survivor of them;
- (4) To the duly appointed executor or administrator of the estate of the person;
- (5) If there are none of the above, to other next of kin of the person entitled under the laws of domicile of the person at the time of the person's death.

The member should make specific designations, as it expedites payment.

#### **INSTRUCTIONS FOR PREPARING DD FORM 93**

(Continued)

ITEM 11a. (Continued) Seek legal advice if naming a minor child as a beneficiary. If a member has a spouse but designates a person other than the spouse to receive all or a portion of the death gratuity pay, the Service concerned is required to provide notice of the designation to the spouse.

NOT APPLICABLE to civilians.

Item 11b. Relationship. NOT APPLICABLE to civilians.

ITEM 11c. Enter beneficiary(ies) full mailing address and telephone number to include the ZIP Code. **NOT APPLICABLE to civilians.** 

ITEM 11d. Show the percentage to be paid to each person. Enter 10%, 20%, 30%, up to 100% as appropriate. The sum shares must equal 100 percent. If no percent is indicated and more than one person is named, the money is paid in equal shares to the persons named. NOT APPLICABLE to civilians.

ITEM 12a. Beneficiary(ies) for Unpaid Pay/Allowance (Military only). Enter first name(s), middle initial, last name(s) and relationship of person to receive unpaid pay and allowances at the time of death. The member may indicate anyone to receive this payment. If the member designated two or more beneficiaries, state the percentage to be paid each in item 10c. If the member does not wish to designate a beneficiary, enter "By Law." The member is urged to designate a beneficiary for unpaid pay and allowances as payment will be made to the person in order of precedence by law (10 USC 2771) in the absence of a designation. Seek legal advice if naming a minor child as beneficiary. NOT APPLICABLE to civilians.

ITEM 12b. Enter beneficiary(ies) full mailing address and telephone number to include the ZIP Code. NOT APPLICABLE to civilians.

ITEM 12c. If the member designated two or more beneficiaries, state the percentage to be paid each in this section. The sum shares must equal 100 percent. **NOT APPLICABLE to civilians.** 

ITEM 13a. Enter the name and relationship of the Person Authorized to Direct Disposition (PADD) of your remains should you become a casualty. Only the following persons may be named as a PADD: surviving spouse, blood relative of legal age, or adoptive relatives of the decedent. If neither of these three can be found, a person standing in loco parentis may be named. **NOT APPLICABLE to civilians.** 

ITEM 13b. Address and telephone number of PADD. **NOT APPLICABLE to civilians.** 

ITEM 14. Continuations/Remarks. Use this item for remarks or continuation of other items, if necessary. Prefix entry with the number of the item being continued; for example, 5/John J./son/ 19851220/321 Pecan Drive, Schertz TX 78151. Also use this item to list name, address, and relationship of other persons the member desires to be notified. Other dependents may also be listed. This block offers the greatest amount of flexibility for the member to record other important information not otherwise requested but considered extremely useful in the casualty notification and assistance process. Besides continuing information from other blocks on this form, the member may desire to include additional information such as: NOK language barriers, location or existence of a Will, additional private insurance information, other family member contact numbers, etc. If additional space is required, attach a supplemental sheet of standard bond paper with the information.

ITEM 15. Signature of Service Member/Civilian. Check and verify all entries and sign all copies in ink as follows: First name, middle initial, last name. Include rank, rate, or grade if applicable. May be electronically signed (see DoD Instruction 1300.18 for guidelines).

ITEM 16. Signature of Witness. Have a witness (disinterested person) sign all copies in ink as follows: First name, middle initial, last name. Include rank, rate, or grade as appropriate. A witness signature is not required for electronic versions of the DD Form 93 (see DoD Instruction 1300.18).

ITEM 17. Date the member or civilian signs the form. This item is an ink entry and must be completed on all copies.